Fill in this info	rmation to identify y	our case:	Document Fage 1 01 30	
Debtor 1	Kimberly First Name	D. Middle Name	Williamson Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Eastern	District of Pennsylvania	
Case number (If known)				Check if this is an amended filing.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1:			
		Your a	ssets of what you own
Sched	lule A/B: Property (Official Form 106A/B)		,
1a, Co	py line 55, Total real estate, from Schedule A/B	. \$	0.00
1b. Co	py line 62, Total personal property, from <i>Schedule A/B.</i>	\$	8,120.00
1c. Co	py line 63, Total of all property on <i>Schedule A/B</i>	\$	8,120.00
art 2:	Summarize Your Liabilities		
			abilities
0		Amoun	t you owe
	ule D: Creditors Who Have Claims Secured by Property (Official Form 106D) by the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	. \$	0.00
	ule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) py the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	. \$_	0.00
3ь. Со	py the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$	44,955.66
	Your total liabilities	\$	44,955.66
art 3:	Summarize Your Income and Expenses		·
Schedi	ule I: Your Income (Official Form 106I)		
Сору	your combined monthly income from line 12 of Schedule I	. \$	3,226.51
Sched	ule J: Your Expenses (Official Form 106J)		
Сору	our monthly expenses from line 22, Column A, of Schedule J	. \$	3,248.00

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Debtor 1 Kimberly Page 2 of 36 Case number (if known) Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? E Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 4,379.42 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 0.00 9a. Domestic support obligations (Copy line 6a.) 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) 0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as 0.00 priority claims. (Copy line 6g.)

+ \$

\$ _____

0.00

0.00

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

		se 23-10880-amc	Doc 6	Filed 03/28/23	0 00	8/23	14:16:05	Desc Main
Fill in th	is info	rmation to identify your case:		Document Pa	age 3 of 36			
Debtor	1). Middle Name	Williamson Last Name				
Debtor (Spouse,		First Name	Middle Name	Lasi Name				
		Bankruptcy Court for the: East		District of Pennsylv	vania			
Case n				District of 1 Chinayi	varia			
(If know							Check if this i	s an amended filing.
Offic	ial	Form 106A/P						
		Form 106A/B						
Sch	edu	le A/B Property	<u>y</u>					12/15
categor respons pages,	ry whe	ory, separately list and de- ere you think it fits best. E or supplying correct infor your name and case numb	Be as complet mation. If mo per (if known).	e and accurate as poss re space is needed, att . Answer every questio	sible. If two married ach a separate shee nn.	people t to this	are filing toget	her, both are equally
Part 1:		escribe Each Residence, Bu						
		rn or have any legal or equator or or to Part 2.	uitable interes	st in any residence, bui	lding, land, or simila	ar prope	erty?	
		Where is the property?		8				
1.1.	-			What is the property? ☐ Single-family home ☐ Duplex or multi-unit b	puilding	t A	the amount of any	ured claims or exemptions. Put secured claims on <i>Schedule</i> Have Claims Secured by
	Street	address, if available, or other de	escription	☐ Condominium or coo ☐ Manufactured or mot ☐ Land	•		Current value o	of the Current value of the portion you own?
				☐ Investment property		5	\$	\$ <u></u>
	City	State	ZIP Code	☐ Timeshare ☐ Other			interest (such a	ature of your ownership as fee simple, tenancy by or a life estate), if known.
				Who has an interest in	the property? Check	k one.		
				Debtor 1 only Debtor 2 only		:: =		
				Debtor 1 and Debtor				his is community see instructions)
	County			At least one of the de		bio iton		,
				Other information you property identification				·
If you	u own	or have more than one, list	here:	What is the preparty?	Charle all that and		De met de dont	and drive a second to a D. (
1.2.	Street	address, if available, or other de	escription	What is the property? Single-family home Duplex or multi-unit b	puilding	t	the amount of any	ured claims or exemptions. Put secured claims on <i>Schedule</i> Have Claims Secured by
	Sileei	address, ir available, or other de	escription	☐ Condominium or coo ☐ Manufactured or mot ☐ Land			Current value o entire property	of the Current value of the ? portion you own?
10				☐ Investment property ☐ Timeshare		5	\$	\$
(3)	City	State	ZIP Code	Other			interest (such a	ature of your ownership as fee simple, tenancy by or a life estate), if known.
				Who has an interest in	the property? Check	k one		
				Debtor 1 only Debtor 2 only				
-0				Debtor 1 and Debtor At least one of the de	•			his is community see instructions)
	County					u.:_ :-		,
				Other information you property identification				

Debtor 1	Case 23-1088 Kimberly First Name	B0-amc D D. Middle Name	oc 6	Filed 03/28/23 Entered 03/28/23 Domument Page 4 of 36 Case nu Last Name	3 14:16:05 De	sc Main
1.3.	Street address, if available	e, or other descript	otion	What is the property? Check all that apply. ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land ☐ Investment property ☐ Timeshare	Do not deduct secured check the amount of any secure Creditors Who Have Claim Current value of the entire property? \$	ed claims on Schedule D ms Secured by Property.
i	City	State ZIP	□ Code	☐ Other Who has an interest in the property? Check one. ☐ Debtor 1 only	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
	County			□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another Other information you wish to add about this it	Check if this is (see instructions	
2 A dd	the dollar value of the	e portion vou o	own for a	ll of your entries from Part 1, including any entri	ies for pages	\$ 0.00
	_					
Do you rehicles leases. B. Cars	s you own that someon s, vans, trucks, tracto	egal or equitab e else drives. If	you lease	st in any vehicles, whether they are registered on a vehicle, also report it on Schedule G: Executory so, motorcycles		d
Do you rehicles eases. Cars X	own, lease, or have I is you own that someon is, vans, trucks, tracto No Yes Make: Model: Year: Approximate mileage:	egal or equitable else drives. If yours, sport utility Ford Escape	you lease	e a vehicle, also report it on Schedule G: Executory		aims or exemptions. Pul ad claims on Schedule D ms Secured by Property
Do you rehicles eases. Cars X X X X X X X X X X X X X X X X X X	own, lease, or have I is you own that someon is, vans, trucks, tracto No Yes Make: Model: Year:	egal or equitable else drives. If yours, sport utility Ford Escape	you lease	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D ms Secured by Property Current value of the
Do you rehicles .eases. B. Cars S. Cars 3.1.	own, lease, or have I is you own that someon is, vans, trucks, tracto No Yes Make: Model: Year: Approximate mileage:	egal or equitable else drives. If yours, sport utility Ford Escape 2013 80000	you lease	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	aims or exemptions. Pul ed claims on Schedule C ms Secured by Property Current value of the portion you own? \$\$5,589.00
Po you rehicles eases. Cars 3.1.	own, lease, or have I is you own that someon is, vans, trucks, tracto No Yes Make: Model: Year: Approximate mileage: Other information:	egal or equitable else drives. If yours, sport utility Ford Escape 2013 80000 an one, describe Honda Odyssey 2001	you lease	who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$	aims or exemptions. Pul ad claims on Schedule D ms Secured by Property Current value of the portion you own? \$

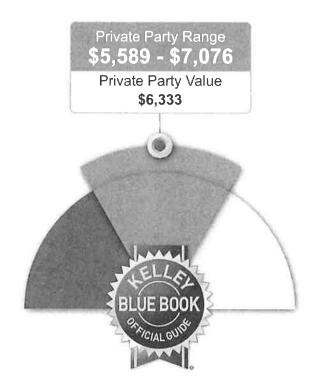
2013 Ford Escape Pricing Report

Style: S Sport Utility 4D

Mileage: 80,000

KBB.com Consumer Rating: 4/5

Sell to Private Party



Valid for **ZIP code 19401** through **03/06/2023**

Debtor 1	Case 23-10880)-amc Doc 6		led 03/28/23 Entered 03/28/2 icumsent Page 6 of 36 Case nu	3 14:16:05 Imber (if known)	De	sc Main
00001	Kimberly First Name	Middle Name		st Name	miser (ii kilowi)	-	
3,3,	Make: Model:			o has an interest in the property? Check one, Debtor 1 only	the amount of any s	secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Year:			Debtor 2 only Debtor 1 and Debtor 2 only			Current value of the
	Approximate mileage:		Ц	At least one of the debtors and another	entire property?		portion you own?
	Other information:			Check if this is community property (see instructions)	\$	_	\$
3.4.	Make: Model:		Wr	to has an interest in the property? Check one. Debtor 1 only	the amount of any s	secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
	Year: Approximate mileage:			Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of entire property?		Current value of the portion you own?
	Other information:			Check if this is community property (see instructions)	\$	_	\$
4.1.	Make: Model: Year: Other information:		w	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	the amount of any s Creditors Who Have	secure e Cla f the	laims or exemptions. Put ed claims on Schedule D ims Secured by Property. Current value of the portion you own?
				Check if this is community property (see instructions)	\$	<u> </u>	\$
If you	u own or have more than	n one, list here:					
4.2.	Make: Model:		Wr	no has an interest in the property? Check one, Debtor 1 only Debtor 2 only	the amount of any s	secur	laims or exemptions Put ed claims on <i>Schedule D</i> ims Secured by Property.
	Year: Other information:			Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of entire property?		Current value of the portion you own?
				Check if this is community property (see instructions)	\$		\$
				your entries from Part 2, including any entr		— →	\$5,589.00

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Desc Main

Debtor 1

Doldiament

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Part 3: Describe Your Personal and Household Items Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Personal furniture and furnishings X..Yes. Describe..... 1,000.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games TV, cellphone, computer X..Yes. Describe.... 300.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **⋉**..No ☐..Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **⋉**..No Yes. Describe..... \$ 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ...Yes. Describe. 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Personal clothing Yes, Describe..... 500.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver **⊠**..No ☐..Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses Cat, family pet X..Yes. Describe..... 1.00 14. Any other personal and household items you did not already list, including any health aids you did not list **▼**..No ☐..Yes. Describe..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have 1.801.00 attached for Part 3. Write that number here

Case 23-10880-amc

Middle Name

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Desc Main

Debtor 1

Kimberly First Name

D.

Dronglingent

Page 8 of 36 Case number (if known)

Part 4:

Describe Your Financial Assets

Do y	ou own or have any l	egal or equitable interest in any	of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions,
16. (nave in your wallet in your home	in a safe deposit box, and on hand when you file y	our petition	
		are in your wanes, in your nome,	in a said deposit box, and off hard when you me	your pention	
×			Ca	ash:	\$30.00
			ě		
	Deposits of money kamples: Checking, sa houses, and	avings, or other financial accounts other similar institutions. If you ha	; certificates of deposit; shares in credit unions, bu	okerage t each.	
×	No Yes		Institution name:		
		17.1. Checking account:	Bankcorp Bank		\$100.00
		17.2. Checking account:	7		\$
		17.3. Savings account:	2 		\$
		17.4. Savings account:	D		\$
		17.5. Certificates of deposit:	·		\$
		17.6. Other financial account:	8		\$
		17.7. Other financial account:	8		\$
		17.8. Other financial account:	S 		\$
		17,9. Other financial account:	X 		\$
	amples: Bond funds, i	, or publicly traded stocks nvestment accounts with brokera Institution or issuer name:	ge firms, money market accounts		
		N2			\$
					\$
					\$
		stock and interests in incorpora artnership, and joint venture	ted and unincorporated businesses, including	an	
×		Name of entity:	% c	f ownership:	
_	information about	8	0.0	0 %	\$
	them.	*	0.0	<u>o</u> %	\$
		u .	0.0	<u>0</u> %	\$

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Debtor 1 Distribution Page 9 of 36 Case number (if known) Kimberly 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. × No Issuer name: Yes. Give specific information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Fidelity Investments \$_____600.00 Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: \$___ 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **⋉** No ☐ Yes..... Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: ___ Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

Yes Issuer name and description:

⋉ No

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Dogitment Page 10 of 36 Case number (if known) Debtor 1 Kimberly 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Yes _____ Institution name and description. Separately file the records of any interests,11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit **⋉** No Yes. Give specific information about them. 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements **⋉** No Yes. Give specific information about them. 27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses **⋉** No ☐ Yes. Give specific information about them, Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **⋉** No ☐ Yes: Give specific information about Federal: them, including whether you already filed the returns and the tax State: years,..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **⋉** No Yes. Give specific information...... Alimony:

⋉ No

30. Other amounts someone owes you

Yes. Give specific information.....

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

Maintenance: Support:

Divorce settlement: \$_
Property settlement: \$_

Debtor 1 Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Entered 03/28/23 14:16:05 Desc Main Page 11 of 36 Case number (if known)

31		erests in insurance policies mples: Health, disability, or life insurar	ce; health savings account (HSA); credit, homed	owner's, or renter's insurance	
		No				
	×	Yes.Name the insurance company of each policy and list its value,	Company name:		Beneficiary:	Surrender or refund value:
			Met Life (Term Life Policy)		Children	Г 0.00
			State Farm Auto		Debtor	\$ 0.00
					.=	\$0.00
	If yo	y interest in property that is due yo u are the beneficiary of a living trust, o ive property because someone has di No	spect proceeds from a life in		re currently entitled to	Φ
		Yes. Give specific information				\$
	Exam	nims against third parties, whether emples: Accidents, employment dispute No Yes. Describe each claim	s, insurance claims, or rights	s to sue		\$ \$
	×	y financial assets you did not alrea No Yes. Give specific information	y list			\$
36.		d the dollar value of all of your entr ached for Part 4. Write that number	_	· -	-	\$730.00
Pai	rt 5:	Describe Any Business-Related	Property You Own or Have	e an Interest In. Lis	t any real estate in Part 1	
37.	Do	you own or have any legal or equit No. Go to Part 6. Yes. Go to line 38.	ble interest in any busine	ss-related property	7?	Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	_	counts receivable or commissions	ou already earned			
		Yes. Describe				\$
	Exam	ice equipment, furnishings, and su ples: Business-related computers, softwar No		machines, rugs, teleph	nones, desks, chairs, electronic devices	
		Yes, Describe,				\$

Page 12 of 36 Case number (if known) Doggument Debtor 1 Kimberly First Name Last Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade □ No Yes. Describe 41. Inventory ☐ No Yes. Describe, 42. Interests in partnerships or joint ventures ☐ No Yes. Describe Name of entity: % of ownership: 0.00% \$_____0.00 0.00% 0.00% 43. Customer lists, mailing lists, or other compilations ☐ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ Yes. Describe...... \$_ 44. Any business-related property you did not already list ☐ No Yes. Give specific information 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached 0.00 for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish □ No

Yes.....

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Debtor 1 Page 13 of 36 Case number (if known) Kimberly First Name 48. Crops—either growing or harvested ☐ No Yes. Give specific information... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade □ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information...... \$ 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here 0.00 Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership × No Yes, Give specific information..... 0.00 List the Totals of Each Part of this Form 0.00 5,589.00 1,801.00 730.00 0.00 0.00

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Fill in this information to identify your case: Williamson Debtor 1 Kimberly Debtor 2 First Name Middle Name (Spouse, if filing) Lasl Name United States Bankruptcy Court for the: Eastern District of Pennsylvania Case number Check if this is an amended filing. (If known) Official Form 106C Schedule C: The Property You Claim As Exempt 04/22 Be as complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt, If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow Schedule A/B that lists this property portion you own exemption Copy the value from Check only one box for each Schedule A/B exemption. Brief 11 USC 522(d)(2) 5,589.00 <u>Ford</u> **×** \$ 5,589.00 description: 11 USC 522(d)(5) 100% of fair market value, up to Line from any applicable statutory limit Schedule 3.1 A/B: Brief 11 USC 522(d)(5) 100.00 × s **Honda** 100.00 description: □ 100% of fair market value, up to Line from any applicable statutory limit Schedule 3.2 A/B: 11 USC 522(d)(3) 1,000.00 Personal furniture and f \$ 1,000,00 description: ☐ 100% of fair market value, up to Line from any applicable statutory limit Schedule A/B: Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

⋉ No

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

□ No

☐ Yes

Case 23-10880-amc Kimberly D. Debtor 1

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Difficulty Page 15 of 36 Case number (if known)

Last Name

Middle Name

Desc Main

Additional Page Part 2:

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: TV, cellphone, computer Line from Schedule A/B:7	\$300.00	\$ 300.00 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(3)
Brief description: Personal clothing Line from Schedule A/B:11	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(3)
Brief description: Cat, family pet Line from Schedule A/B:13	\$1.00	\$ 1.00 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(5)
Brief description: Cash Line from Schedule A/B: 16	\$30.00	\$ 30.00 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(5)
Brief description: Line from Schedule A/B:	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(5)
Brief description: Fidelity Retirement Line from Schedule A/B:21.1_	\$600.00	\$ 600.00 100% of fair market value, up to any applicable statutory limit	11 USC 522(d)(12)
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ \$100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit	

Ca	ise 23-10880-amc	Doc 6	Filed 03/28/23		3/28/23 14:16	:05 Desc Ma	ain
ill in this info	rmation to identify your case		Document Pag	ge 16 of 36	3		
Debtor 1		D.	Williamson				
Debtor 2	First Name	Middle Name	Last Name				
Spouse, if filing)	First Name	Middle Name	Last Name				
Inited States	Bankruptcy Court for the: Eas	stern	District of Pennsylv	ania	1		
Case number (If known)			- ::			r ii r	1 (20)
					□ Check i	f this is an amen	aea tiling.
	Form 106D				_		
	Ile D: Creditors					enoneible for eurn	12/1
formation.	If more space is needed,	, copy the A	dditional Page, fill it out				
-	ages, write your name and reditors have claims secu						
	heck this box and submit thi			dules. You have r	nothing else to repor	t on this form.	
	fill in all of the information b						
art 1: List	All Secured Claims						
List all se	cured claims. If a creditor I	has more thar	n one secured claim, list th	e creditor	Column A	Column B	Column C
	/ for each claim. If more than Part 2. As much as possit				Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
creditor's		575, 1151 ti 115 675	into in dipridization of done	loodiding to the	value of collateral.	claim	If any
1		Descri	be the property that secur	es the claim:	\$	\$	\$
Creditor's Na	ame						
Number	Street	— As of	the date you file, the clai	m is: Check all	I t		
		that ap					
-	:::		ontingent				
City	State ZIP Co		nliquidated				
•	the debt? Check one.		e of lien . Check all that ap	ply			
Debtor		_	•	-			
☐ Debtor			n agreement you made (suc cured car loan)	th as mortgage or			
☐ Debtor	1 and Debtor 2 only	☐ Sta	atutory lien (such as tax lien,	mechanic's lien)			
☐ At least	one of the debtors and and		dgment lien from a lawsuit				
☐ Check	if this claim relates to a	☐ Otl	her (including a right to offset)				
	inity debt						
Date debt w	vas incurred	Last 4	digits of account number		,		
		Descri	ibe the property that secur	es the claim:	\$	\$	\$
Creditor's Na	ame						
Number	Street		the date you file, the clai	m is: Check all			
		that ap	, •				
			ontingent nliquidated				
City	State ZIP Co		sputed				
Who owes	the debt? Check one		e of lien. Check all that ap	nly			
☐ Debtor	1 only		·	. ,			
☐ Debtor	-		n agreement you made (su secured car loan)	cn as mortgage			
Debtor	1 and Debtor 2 only	_	atutory lien (such as tax lien,	mechanic's lien)			
☐ At least	one of the debtors and and		dgment lien from a lawsuit				
☐ Check	if this claim relates to a		her (including a right to offset				
commu	ınity debt						
	vas incurred		digits of account number			1	
Add the dol	llar value of vour entries i	n Column A	on this name. Write that r	umber here:	\$ 0.00	1	

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Fill in this i	nformation to identify your case:							
Debtor 1	Kimberly D.		Williamson					
Debtor 2	First Name Middle	Name	Last Name					
(Spouse, if filing	ng) First Name Middle	Name	Last Name					
United Sta	ates Bankruptcy Court for the: Eastern		District of Pennsylvania					
Case num (If known)	nber				Check if the	nis is an am	ended	l filing.
Officia	al Form 106E/F							
	ule E/F: Creditors Who							12/15
List the or A/B: Prop creditors needed, cr any additi	ther party to any executory con erty (Official Form 106A/B) and o with partially secured claims the opy the Part you need, fill it out, onal pages, write your name and	racts or n Sched at are li number t case nu	` '	aim. Leas Clair	Also list exectes (Official Forms Secured b	cutory contra orm 106G). Do by <i>Property</i> . I	icts on o not ind If more	Schedule clude any space is
Part 1:	List All of Your PRIORITY Unsecu							
No Ye 2. List all each cl nonpric	of your priority unsecured claim aim listed, identify what type of clai ority amounts. As much as possible ared claims, fill out the Continuation	s. If a cre m it is. If a list the c Page of I	ditor has more than one priority unsecured cla a claim has both priority and nonpriority amou laims in alphabetical order according to the creater 1, If more than one creditor holds a particustructions for this form in the instruction book	nts, lis editor ular c	st that claim he 's name. If you	re and show b have more th	oth prio an two p	rity and priority
(1 Of all	explanation of each type of claim,	300 tile ii	istructions for this form in the instruction book	et.)	Total claim	Priority amount		priority ount
2.1		. La	st 4 digits of account number		\$	\$	\$	0.00
Priority	Creditor's Name		hen was the debt incurred?			==		
	State ZIP Code incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only at least one of the debtors and another Check if this claim is for a community de claim subject to offset?		Unliquidated Disputed Pe of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while yo were intoxicated	u				
2.2	Creditor's Name	La	st 4 digits of account number		\$	\$	\$_	0.00
		w	hen was the debt incurred?					
D D D A C Is the	State ZIP Code incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only at least one of the debtors and another check if this claim is for a community de	Ty	Unliquidated Disputed pe of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while yo were intoxicated	u				

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Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part, Submit this form to the court with your other schedules.

Yes

-	Elst / til of Total Noval Nicotal College Claims				
3.	Do any creditors have nonpriority unsecured claims against you'	?			
	No. You have nothing to report in this part, Submit this form to the	e court with	your other schedules.		
	⋭ Yes				
		and or of the	areditar who halds sook aloim. If a graditar h	aa mara th	00 000
	List all of your nonpriority unsecured claims in the alphabetical or priority unsecured claim, list the creditor separately for each claim. Fo				
	ncluded in Part 1. If more than one creditor holds a particular claim, li				
	claims fill out the Continuation Page of Part 2.	ist the other	creditors in r art 5.11 you have more than lour p	ionty unse	cured
	Samo in out the continuation rage of rare 2.			Total cla	aim
4.1]				
	American Heritage FCU	Last 4 digi	ts of account number	\$	1,090.00
	Nonpriority Creditor's Name	When was	the debt incurred? various dates		
	2060 Red Lion Road	Wileli Was	the debt incurred:various dates		
	Number Street	As of the	date you file, the claim is: Check all that		
	Philadelphia PA 19115	apply.	date you me, and olam let one on all the		
	City State ZIP Code				
	*	□ Conti	ngent		
	Who incurred the debt? Check one.	Unliq	uidated		
	■ Debtor 1 only	☐ Dispu	ited		1
	☐ Debtor 2 only	'			
	☐ Debtor 1 and Debtor 2 only	Type of N	ONPRIORITY unsecured claim:		1
	☐ At least one of the debtors and another	☐ Stude	ent loans		
	_	Ohlig	ations arising out of a separation agreement		
	☐ Check if this claim is for a community debt	_	vorce that you did not report as priority claims		
	In the elein publicat to effect?				1
	Is the claim subject to offset?	■ Debts	s to pension or profit-sharing plans, and other		
	⋉ No	simila	ar debts		
	☐ Yes	Other	r. Specify credit card purchases		
4.2	1				0220
	American Water/PAWC	Last 4 digi	ts of account number	\$	100.00
	Nonpriority Creditor's Name	Whon was	the debt incurred?various dates		
	852 Wesley Drive	Wilch was	the debt incurred:various dates		
	Number Street	As of the	date you file, the claim is: Check all that		
	Mechanicsburg PA 17055	apply.	•		
	City State ZIP Code				
	Who incurred the debt? Check one.	-	ngent		
	⊠ Debtor 1 only	☐ Unliq	uidated		
		Dispu	uted		
	Debtor 2 only	Type of N	ONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	☐ Stude	ent loans		
	☐ Check if this claim is for a community debt	☐ Oblig	ations arising out of a separation agreement		
	and the state of t	or div	vorce that you did not report as priority claims		
	Is the claim subject to offset?		s to pension or profit-sharing plans, and other		
	× No		ar debts		
	Yes	Free Contract Contrac			
		Le Otne	r. Specify <u>Utility service</u>		
4.3	Bank of Missouri	Last 4 digi	its of account number	\$	1,000.00
	Nonpriority Creditor's Name				
		When was	the debt incurred?various dates		
	P.O. Box 4499 Number Street				
			date you file, the claim is: Check all that		
	Beaverton OR 97076	apply.			
	City State ZIP Code	☐ Contir	ngent		
	Who incurred the debt? Check one.		idated		
	Debtor 1 only	_			
	Debtor 2 only	☐ Disput	ted		
	Debtor 1 and Debtor 2 only	Type of N	ONPRIORITY unsecured claim:		
	·	_	nt loans		
	At least one of the debtors and another	_			
	☐ Check if this claim is for a community debt	_	ations arising out of a separation agreement or		
	•	divorc	e that you did not report as priority claims		
	Is the claim subject to offset?	☐ Debts	to pension or profit-sharing plans, and other		
	⋉ No	similar	debts		
	☐ Yes	Other.	Specify credit card purchases		

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Debtor 1

Kimberly

Dogument

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Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim Capital One Bankruptcy Department (P) Last 4 digits of account number Nonpriority Creditor's Name 1,376.00 P.O Box 30285 When was the debt incurred? mscl dates Salt Lake City UT 84130-0285 As of the date you file, the claim is: Check all that ZIP Code appły. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims **⋉** No Debts to pension or profit-sharing plans, and other ☐ Yes similar debts × Other. Specify credit card 4.5 Celtic Bank Indigo Card Last 4 digits of account number Nonpriority Creditor's Name 100.00 Box 4499 P.O. When was the debt incurred? various dates Number OR <u>Beaverton</u> 97076 As of the date you file, the claim is: Check all that State ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims **⋉** No Debts to pension or profit-sharing plans, and other ☐ Yes similar debts Other. Specify credit card purchases CKS Prime Investments Last 4 digits of account number Nonpriority Creditor's Name 214.00 1800 Route 34 N. Bldg 3 Suite 305 When was the debt incurred? __various dates_ Number Street Wall NJ 07719 As of the date you file, the claim is: Check all that ZIP Code apply. Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims **⋉** No Debts to pension or profit-sharing plans, and other Yes similar debts Other. Specify credit card purchases

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Debtor 1

Kimberly First Name

D. Middle Name Dogument Page 20 of 36 Case number (if known)

Your NONPRIORITY Unsecured Claims - Continuation Page Part 2:

Afte	r listing any entries on this page, number them beginning with	4.5, followed by 4.6, and so forth.	Total claim
4.7	Credit One Bank General Correspondence Nonpriority Creditor's Name	Last 4 digits of account number	\$542.00
	P.O. Box 98873 Number Street	When was the debt incurred?mscl dates	
	Las Vegas NV 89193-8873 Cily State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes	 Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Credit card 	
4.8	DelDOT Nonpriority Creditor's Name	Last 4 digits of account number 7 4 1 4	\$133.00
	P.O. Box 778 Number Street	When was the debt incurred?	
	DoverDE19903CityStateZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: 	
	□ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	 ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify Registration 	
4.9	Einstein Healthcare Network Nonpriority Creditor's Name	Last 4 digits of account number	\$ 576.00
	559 West Germantown Pike Number Street East Norriton PA 19401 City State ZIP Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply.	Ψ
	Who incurred the debt? Check one. ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed	
	At least one of the debtors and another Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or	
	Is the claim subject to offset? ☑ No ☐ Yes	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical services	

Debtor 1

Case 23-10880-amc Kimberly D.

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning with	1.5, followed by 4.6, and so forth.	Total claim
4.10	Einstein Healthcare Network Nonpriority Creditor's Name	Last 4 digits of account number	\$339.68
	559 West Germantown Pike Number Street	When was the debt incurred?	
	East Norriton PA 19401 City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other, Specify Medical services 	
4.11	Exeter Finance Nonpriority Creditor's Name	Last 4 digits of account number $8\ 5\ 7\ 5$	\$7,703.83
	P.O. Box 166008 Number Street	When was the debt incurred?	
	IrvingTX75016CityStateZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: 	
	☐ Check if this claim is for a community debt Is the claim subject to offset? INO ☐ Yes	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ▼ Other, Specify Car loan balance, surrendered vehicle	
4.12	First Access Card Nonpriority Creditor's Name	Other. Specify <u>Car loan balance, surrendered vehicle</u> Last 4 digits of account number	\$ 579.04
	P.O. Box 89028 Number Street Sioux Falls SD 57109-9028 City State ZIP Code	When was the debt incurred?mscl dates As of the date you file, the claim is: Check all that	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	apply. Contingent Unliquidated Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a separation agreement or	
	Is the claim subject to offset? ☑ No ☐ Yes	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify credit card purchases	

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Debtor 1

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Kimberly

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Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim Internal Revenue Service Last 4 digits of account number 18,037.59 P.O Box 7346 When was the debt incurred? Street Philadelphia PA 19101-7346 As of the date you file, the claim is: Check all that ZIP Code apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims ▼ No Debts to pension or profit-sharing plans, and other ☐ Yes similar debts × Other. Specify Taxes Linebarger Goggin Blair & Sampson LLP Last 4 digits of account number 9 3 8 4 Nonpriority Creditor's Name 53.35 John F. Kennedy Blvd When was the debt incurred? Number Street <u>Philadelphia</u> 19103 PΑ As of the date you file, the claim is: Check all that ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims **⋉** No Debts to pension or profit-sharing plans, and other ☐ Yes similar debts Other. Specify medical services Merrick Bank Customer Service Last 4 digits of account number Nonpriority Creditor's Name 1,578.00 P.O Box 9201 When was the debt incurred? ____mscl dates Number Street Old Bethpage NY 11804 As of the date you file, the claim is: Check all that ZIP Code apply. Who incurred the debt? Check one. Contingent Debtor 1 only П Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only At least one of the debtors and another Type of NONPRIORITY unsecured claim: Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims

⋉ No

☐ Yes

similar debts

Debts to pension or profit-sharing plans, and other

Other. Specify credit card purchases

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Debtor 1

Page 23 of 36 Case number (if known) Kimberly Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim OneMain Financial Last 4 digits of account number Nonpriority Creditor's Name 9,305.00 Box 64 When was the debt incurred? ___various dates ___ Evansville 47701-0064 In As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? ✓ No. Debts to pension or profit-sharing plans, and other ☐ Yes similar debts X Other. Specify revolving credit OpenSky National Bank Card Services Last 4 digits of account number Nonpriority Creditor's Name 155.00 P.O Box 9224 When was the debt incurred? various dates Street NY 11804-9224 Old Bethpage As of the date you file, the claim is: Check all that State ZIP Code apply. Contingent Who incurred the debt? Check one. П Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other ☐ Yes similar debts × Other. Specify credit card purchases Premier Bankcard/First Premier Bank Last 4 digits of account number Nonpriority Creditor's Name 1,376.17 <u>50</u>0 South Minnesota Avenue When was the debt incurred? various dates Number Sioux Falls SD 57104 As of the date you file, the claim is: Check all that ZIP Code apply. Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated ☐ Debtor 2 only Disputed Debtor 1 and Debtor 2 only

⋉ No

☐ Yes

At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community debt

×

Type of NONPRIORITY unsecured claim:

Other. Specify credit card purchases

Obligations arising out of a separation agreement or

divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other

Student loans

similar debts

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** The Bank of Missouri Total Visa Last 4 digits of account number Nonpriority Creditor's Name 597.00 2700 S. Lorraine Place When was the debt incurred? various dates Number Sioux Falls SD 57106 As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims **⋉** No Debts to pension or profit-sharing plans, and other Yes similar debts Other. Specify Credit Card The Bank of Missouri/Aspire Last 4 digits of account number Nonpriority Creditor's Name 100.00 Box 10555 SW #1340 P.O. When was the debt incurred? various dates Atlanta Cily GA 30348 As of the date you file, the claim is: Check all that ZIP Code State apply. Who incurred the debt? Check one. Contingent Unliquidated Debtor 1 only Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims **⋉** No Debts to pension or profit-sharing plans, and other ☐ Yes similar debts Other. Specify credit card purchases Last 4 digits of account number Nonpriority Creditor's Name Number Street When was the debt incurred? As of the date you file, the claim is: Check all that State ZIP Code apply. Who incurred the debt? Check one. Contingent Debtor 1 only Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or Is the claim subject to offset? divorce that you did not report as priority claims ☐ No Debts to pension or profit-sharing plans, and other Yes similar debts Other, Specify

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Debtor 1

First Name

Middle Name

Part 3: List Others to Be Notified About a Debt That You Already Listed

					ot fill out or submit this page.
Michael F. Ratchford Esquir	9	-		_	t 2 did you list the original creditor?
54 Glenmaura Nati	onal Blvd.		Line 4.1 of (Check one):	П	Part 1: Creditors with Priority Unsecured Claims
Suite 104				×	Part 2: Creditors with Nonpriority Unsecured Claims
Moosic City	PA State	18507 ZIP Code	Last 4 digits of account num	nber	Cidillis
Linebarger Goggin Blair & S	ampson LLP		On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?
Name 1617 John F. Kenned	y Blvd.		Line 4.2 of (Check one):		Part 1: Creditors with Priority Unsecured
Number Street Suite 555				×	Claims Part 2: Creditors with Nonpriority Unsecured
Philadelphia	PA State	PA ZIP Code			Claims
City	State	ZIP Code	Last 4 digits of account nun	nber <u>7</u>	7 4 1 4
Grimley Financial Corporation	on		On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?
Name 30 Washington Ave			Line 4.4 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Suite C6				×	Part 2: Creditors with Nonpriority Unsecured Claims
Haddonfield City	NJ State	08033-3341 ZIP Code	Last 4 digits of account nun	nber 3	3 4 4 8
Radius Global Solutions LLC	>		On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?
Name P. O. Box 390905 Number Street			Line 4.6 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street				×	Part 2: Creditors with Nonpriority Unsecured Claims
Minneapolis City	MN State	55439 ZIP Code	Last 4 digits of account num	nber <u>8</u>	<u>3 5 7 5</u>
Financial Recovery Services	Inc.		On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?
Name P.O. Box 385908			Line 4.8 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street				×	Part 2: Creditors with Nonpriority Unsecured Claims
Minneapolis City	MN State	55438-5908 ZIP Code	Last 4 digits of account nur	nber	<u>5 8 3</u>
Penn Credit Corp.			On which entry in Part 1 o	r Par	t 2 did you list the original creditor?
Name 2800 Commerce Driv	9		Line 4.9 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Number Street				×	Part 2: Creditors with Nonpriority Unsecured Claims
Harrisburg City	PA State	17110 ZIP Code	Last 4 digits of account nur	nber <u>(</u>	
Jefferson Capital Systems L	LC (P)		On which entry in Part 1 o	r Par	t 2 did you list the original creditor?
Name P.O. Box 7999 Number Street			Line 4.10 of (Check one):		Part 1: Creditors with Priority Unsecured Claims
Onesi				×	Part 2: Creditors with Nonpriority Unsecured Claims
Saint Cloud	MN				

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Debtor 1

Kimberly First Name

Dagument

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List Others to Be Notified About a Debt That You Already Listed Part 3:

		risolis to be notil			ot fill out or submit this page.			
Jefferson Capital Systems LL Name	.0		On which entry in Part 1 or Part 2 did you list the original cred					
16 McLeland Road Number Street			Line 4.10 of (Check one):	Ш	Part 1: Creditors with Priority Unsecured Claims			
Ch Claud	MAN	50202		×	Part 2: Creditors with Nonpriority Unsecured Claims			
St. Cloud City	MN State	56303 ZIP Code	Last 4 digits of account num	ıber g	<u>9 2 0 6</u>			
OpenSky Capital Bank N.A.			On which entry in Part 1 o	r Parl	t 2 did you list the original creditor?			
Name P.O. Box 8130 Number Street			Line 4.12 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
Maniper Street				×	Part 2: Creditors with Nonpriority Unsecured			
Reston City	VA State	ZIP Code			Claims			
Ску	State	ZIP Code	Last 4 digits of account num	ber				
Capital One			On which entry in Part 1 o	r Parl	t 2 did you list the original creditor?			
Name P.O. Box 31293 Number Street			Line 4.11 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
				×	Part 2: Creditors with Nonpriority Unsecured Claims			
Salt Lake City City	UT State	84131 ZIP Code	Last 4 digits of account num	ber				
American Heritage F.C.U.			On which entry in Part 1 or	r Pari	t 2 did you list the original creditor?			
Name 3110 Grant Avenue Number Street			Line 4.1 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
Number Street				×	Part 2: Creditors with Nonpriority Unsecured Claims			
Philadelphia City	PA State	19114 ZIP Code	Last 4 digits of account num	ber				
I.C. System			On which entry in Part 1 o	r Parl	t 2 did you list the original creditor?			
Name P.O. Box 64378			Line 4.9 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
Number Street				×	Part 2: Creditors with Nonpriority Unsecured Claims			
Saint Paul City	MN State	55164 ZIP Code	Last 4 digits of account num	nber				
Receivables Management Sy	stems		On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?			
Name 1807 Huguenot Road			Line 4.9 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
Number Street Suite 118				×	Part 2: Creditors with Nonpriority Unsecured Claims			
Midloathian City	VA State	23113 ZIP Code	Last 4 digits of account num	ıber				
Midland Credit Management	nc.		On which entry in Part 1 o	r Par	t 2 did you list the original creditor?			
Name P.O. Box 301030 Number Street			Line 4.20 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
				×	Part 2: Creditors with Nonpriority Unsecured Claims			
Los Angeles City	CA State	90030-1030 ZIP Code	Last 4 digits of account num		···•			

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Debtor 1

Kimberly First Name

List Others to Be Notified About a Debt That You Already Listed Part 3:

	urgent Capital			ified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor?					
P.O. Number	Box 1269 Street			Line 4.19 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
					×	Part 2: Creditors with Nonpriority Unsecured Claims			
Greenville City		SC State	29602 ZIP Code	Last 4 digits of account num	ber	Olams			
	urgent Capital			On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?			
P.O. Number	Box 10497 Street		•	Line 4.19 of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
0					×	Part 2: Creditors with Nonpriority Unsecured Claims			
Greenville City		Stale	SC ZIP Code	Last 4 digits of account num	ber				
				On which entry in Part 1 o	r Parl	t 2 did you list the original creditor?			
Name	Shoot			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
Number	Street					Part 2: Creditors with Nonpriority Unsecured Claims			
City		State	ZIP Code	Last 4 digits of account num	ber				
				On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?			
Name	Street			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
	Street				×	Part 2: Creditors with Nonpriority Unsecured Claims			
City		State	ZIP Code	Last 4 digits of account num	ber				
				On which entry in Part 1 o	r Pari	t 2 did you list the original creditor?			
Name	Observe		=======================================	Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
Number	Street					Part 2: Creditors with Nonpriority Unsecured Claims			
City		State	ZIP Code	Last 4 digits of account num	ber				
				On which entry in Part 1 o	r Par	t 2 did you list the original creditor?			
Name Number	Street			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
						Part 2: Creditors with Nonpriority Unsecured Claims			
City		State	ZIP Code	Last 4 digits of account num	nber				
				On which entry in Part 1 o	r Par	t 2 did you list the original creditor?			
Name Number	Street			Line of (Check one):		Part 1: Creditors with Priority Unsecured Claims			
			*7			Part 2: Creditors with Nonpriority Unsecured Claims			
City		State	ZIP Code	Last 4 digits of account nun					

Debtor 1

Case 23-10880-amc D.

Doc 6

Desc Main

Kimberly First Name

Middle Name

Part 4:

Add the Amounts for Each Type of Unsecured Claim

1. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$0.00
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$44,955.66
	6j. Total. Add lines 6f through 6i.	6j.	\$ 44,955.66

rean.		se 23-10880-a			Entered 03/28/	/23 14:16:05	Desc Main
71111	in this infor	mation to identify your o	case:	Document Pa	ge 29 of 36		
De	ebtor 1	Kimberly First Name	D. Middle Name	Williamson Last Name			
	ebtor 2 pouse, if filing)	First Name	Middle Name	Last Name	<u></u>		
Uı	nited States	Bankruptcy Court for the:	Eastern	District of Pennsylve	ania		
	ase number f known)					Check if this	is an amended filing.
_	cc	4000			11/00-		is an america ining.
		<u>Form 106G</u>					
-				tracts and Unex			12/15
info	ormation. I	te and accurate as pe f more space is need ges, write your name	led, copy the a	married people are filing to idditional page, fill it out, nu iber (if known).	gether, both are equall mber the entries, and	ly responsible for s attach it to this pag	upplying correct ge. On the top of any
		ve any executory cor		•			
				e court with your other scheduif the contracts or leases are			
2. I				whom you have the contract			
	example, r unexpired l	ent, vehicle lease, ce	ell phone). See	the instructions for this form	n the instruction booklet	for more examples	of executory contracts and
	Person or	company with whom	you have the	contract or lease	State what the	he contract or lease	e is for
2.1							
	Name						
	Number	Street			•		
	City	7112	State ZIP Co	ode			
2.2							
	Name				E		
	Number	Street					
	City		State ZIP Co	ode			
2.3	Name						
	Name						
	Number	Street					
	City		State ZIP Co	ode			
2.4	Name						
	·	20.			2		
	Number	Street					
2.5	City		State ZIP Co	ode			
2.5	Name						
	Number	Street			•		
	City		State ZIP Co	ode			
	~ ,. y		CIGICO ZII CO				

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Fill in this information to identify your case: Williamson Debtor 1 Kimberly D. Middle Name Debtor 2 (Spouse, if filing) Middle Name United States Bankruptcy Court for the: Eastern District of Pennsylvania Case number (If known) Check if this is an amended filing. Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) **⋉** No ☐ Yes 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? □ No Yes. In which community state or territory did you live? ____. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street City ZIP Code State 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 ☐ Schedule D, line ___ Name Schedule E/F, line ____ Number Street Schedule G, line City State ZIP Code 3.2 Schedule D, line Name Schedule E/F, line __

3.3

Official Form 106H

City

Number

City

Name

Number

Street

Street

State

State

ZIP Code

ZIP Code

Schedule H: Your Codebtors

page 1 of _1_

☐ Schedule G, line _

☐ Schedule D, line __

☐ Schedule E/F, line

□ Schedule G, line ___

Fill in this info	rmation to identify y	our case: DOCU	ment Pa	age 31 of 36			
Debtor 1	Kimberly First Name	D. Middle Name	Williamson Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States	Bankruptcy Court for	r the: Eastern	District of Pennsy	/Ivania			
Case number					Check if	f this is:	
(II KIIOWII)						An amended filing	
						A supplement showing post-petition chapter 13 income as of the following date:	
<u>Official</u>	<u>Form 106I</u>				Ī	MM / DD / YYYY	
Sched	ule I: You	ur Income				12/1	5
supplying co spouse. If yo attach a sepa	orrect information ou are separated a	. If you are married and not fi and your spouse is not filing a form. On the top of any add	iling jointly, and with you, do no	d your spouse is livi ot include informatio	ng with n about	tor 2), both are equally responsible for you, include information about your your spouse. If more space is needed, Imber (if known). Answer every question	١.
			Debtor 1			Debtor 2 or non-filing spouse	
	more than one					Debtor 2 or non-ning spouse	٦
	a separate page ation about employers.	Employment status	Employed Not employ	/ed		☐ Employed ☐ Not employed	
Include par or self-emp	t-time, seasonal, loyed work.	Occupation	Sales Suppo	ort			
student or h	may Include omemaker, if it	Occupation					
applies		Employer's name Employer's address	Globus Med 2560 Gener	al Armistead Ave.			_
			Number Stree	t		Number Street	Ī
						S 	
			Audubon	PA 19403			
		How long employed there?	City 3 yrs.	State ZIP Code		City State ZIP Code	
		The state of the s		 -		·	
G	ive Details About	Monthly Income					
	nonthly income a ess you are separa		n. If you have n	othing to report for an	y line, w	rite \$0 in the space. Include your non-filing	
If you or yo	ur non-filing spous		er, combine the	information for all emp	ployers f	or that person on the lines below. If you	
				For Debtor	r 1	For Debtor 2 or non-filing spouse	Ì
	eductions). If not p	s, salary, and commissions (lead monthly, calculate what the		2 \$ 4,0	08.46	s 0.00	
	 e and list monthly	overtime pay.		3, + \$	0.00 +		
4. Calculat	e gross income.	Add line 2 + line 3.		4,0	08.46	\$0.00	

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Debtor 1

Kimberly First Name

Middle Name

Last Name

				For I	Debtor 1		otor 2 or ng spouse		
	Сор	y line 4 here	4.	\$	4,008.46	\$	0.00		
5.		all payroll deductions:		1	=======================================				
80		Tax, Medicare, and Social Security deductions	5a.	\$	759.99	\$	0.00		
	5b.	Mandatory contributions for retirement plans		_	0.00	\$			
		Voluntary contributions for retirement plans		-	113.87	\$			
	5d.	Required repayments of retirement fund loans			0.00	\$			
	5e.	Insurance		_	279.05	\$			
	5f.	Domestic support obligations			0.00	\$			
	5g.	Union dues			0.00	\$			
	5h.	Other deductions. Specify:	5h.	+\$	0.00	+\$			
6.	Add	the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h	6.	\$_	1,152.91	\$	0.00		
7.	Calo	culate total monthly take-home pay. Subtract line 6 from line 4,	7.	\$_	2,855.55				
8.	List	all other income regularly received:							
	8a.	Net income from rental property and from operating a business, profession, or farm							
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$_	0.00	\$	0.00		
	8b.	Interest and dividends	8b.	\$_	0.00	\$	0.00		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive							
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$_	370.96	\$	0.00		
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	0.00		
	8e.	Social Security	8e.	\$_	0.00	\$	0.00		
	8f.	Other government assistance that you regularly receive							
		Include cash assistance and the value (if know) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00		
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00		
	8h.	Other monthly income. Specify:	8h.	-	0.00	+\$	0.00		
			0111	-		_	0.00		
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e +8f +8g +8h	9,	\$_	370.96	\$	0.00		
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	3,226.51	\$	0.00 =	\$	3,226.5
11.	Stat	e all other regular contributions to the expenses that you list in S	ched	ule J.					
		ude contributions from an unmarried partner, members of your households or relatives.	old, y	our de	ependents, your i	roommate	s, and other		
	Doı	not include any amounts already included in lines 2-10 or amounts that	t are r	not av	ailable to pay ex	oenses lis	ted in Schedule	ə J.	
	Spe	cify:					11. +	\$	0.0
12.		I the amount in the last column of line 10 to the amount in line 11. e that amount on the Summary of Schedules and Statistical Summary of Co						\$	3,226.5
		•						Comb	
13.	_ `	you expect an increase or decrease within the year after you file t	his fo	rm?				monti	hly income
	× N								
	ЦΥ	es. Explain:							

Fil		SE 23-10880-2 mation to identify you		2.6 Filed 03/28/2 Document	23 Entered 03/2 Page 33 of 36	28/23 1	L4:16:05 De	esc Main
		UN D U	-5-					
	Debtor 1	Kimberly First Name	D. Middle Name	Williamso Last Name		Check if th	-1-1-	
	Debtor 2 Spouse, if filing)	First Name	Middle Name	Last Name			n amended filing	
ι	Jnited States	Bankruptcy Court for th	e: Eastern	District of Per	nnsvlvania			post-petition chapter 13
	Case number						come as of the following	ng date:
	(If known)			_			MM / DD / YYYY separate filing for Deb	itor 2 because
							ebtor 2 maintains a se	
C	official I	Form 106J						
_								
_		ule J: You						12/15
inf	formation.	rte and accurate as If more space is nee nswer every questic	eded, attach ar	o married people are fill nother sheet to this form	ing together, both are eq n. On the top of any addi	tional pa	ges, write your na	ime and case number
Pa	rt 1: D	escribe Your House	hold					
1.	ls_this a jo							
	_	So to line 2. Does Debtor 2 live in		المام مام م				
		No.	ra separate not	isenoid ;				
		Yes. Debtor 2 must	file a separate	Schedule J.				
2.	Do you ha	ve dependents	□ No					
	Do not list Debtor 2.	Debtor 1 and		ut this information for pendent	Dependent's relationship Debtor 1 or Debtor 2	to	Dependent's age	Does dependent live with you?
	Do not sta	te the dependent's			Daughton		40	□ No ▼ Yes
	names.				Daughter			✓ Yes □ No
					Son		11	× Yes
					2			□ No
					Son		8	Yes D No
								Yes
					•			□ No
								☐ Yes
3.		xpenses include of people other	➤ No Yes.					
	than your dependen	self and your ts?	□ Yes _e					
		stimate Your Ongoi						
ex	timate you penses as plicable da	of a date after the b	our bankruptcy oankruptcy is f	filing date unless you a iled. If this is a supplem	are using this form as a seental <i>Schedule J</i> , check	the box	ent in a Chapter 1 at the top of the fo	3 case to report orm and fill in the
lno su	clude exper ch assistar	nses paid for with n nce and have includ	ion-cash gove led it on <i>Sche</i> d	rnment assistance if you dule I: Your Income (Off	u know the value of icial Form B 6l.)		Your E	Expenses
4.		al or home ownersh and any rent for the		or your residence. Includ	de first mortgage		4. \$	1,950.00
		luded on line 4:						0.00
		l estate taxes				4	a. \$	•
	4b. Prop	perty, homeowner's,	or renter's insu	rance		4	b. \$	0.00
	4c. Hon	ne maintenance, repa	air, and upkeep	expenses		4	c. \$	0.00
	4d. Hom	neowner's associatio	n or condomini	um dues		4	d. \$	0.00

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Last Name Page 34 of 36 Case number (if known) Case 23-10880-amc Kimberly D. First Name Middle Nam Desc Main

Debtor 1 Middle Name

				Your Expenses
ō.	Additional mortgage payments for your residence, such as home equity loans.	5.	\$	0.00
	Utilities:			
68	a. Electricity, heat, natural gas	6a.	\$	0.00
6b	o. Water, sewer, garbage collection	6b,	\$	30.00
60	:. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	100.00
60	l. Other. Specify:	6d.	\$	0.00
*	Food and housekeeping supplies	7.	\$	650.00
	Childcare and children's educational costs	8.	\$	0.00
2	Clothing, laundry, and dry cleaning	9.	\$	50.00
0.	Personal care products and services	10.	\$	50.00
1.	Medical and dental expenses	11.	\$	100.00
2.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	150.00
3.	Entertainment, clubs recreation, newspapers, magazines, and books	13.	\$	100.00
4.	Charitable contributions and religious donations			0.00
5.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	68.00
	15d. Other insurance. Specify:	15d.	\$	0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
7.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from you pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I).	18.	\$	0.00
9.	Other payments you make to support others who do not live with you. Specify:	19.	\$	0.00
0.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: You	r Income	:	
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues			0.00

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Last Name

0.00 21. Other. Specify: 21. \$___ 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 3.248.00 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. 0.00 22c. Add lines 22a and 22b. The result is your monthly expenses. 3,248.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 3,226.51 23a. \$_____ 23b. Copy your monthly expenses from line 22 above. 3,248.00 23b. -\$ ___ 23c. Subtract your monthly expenses from your monthly income. -21.49 The result is your monthly net income. 23c. \$ _____ 24. Do you expect an increase or decrease in your expenses within the year after you file this form?: For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification in the terms of your mortgage? ☐ No. X Yes. Explain here: Inflation increases.

Debtor 1

First Name

Middle Name

Case 23-10880-amc Doc 6 Filed 03/28/23 Entered 03/28/23 14:16:05 Desc Main Fill in this information to identify your case: Debtor 1 <u>Kimberly</u> Williamson Debtor 2 First Name Middle Name (Spouse, if filing) United States Bankruptcy Court for the: Eastern District of Pennsylvania Case number Check if this is an (If known) amended filing Official Form 106Dec **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below
D. I	
ומ you ומ you	pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?
	. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that true and correct.
x_O	Xallluman SIGN HERE
Signatur	Signature of Debtor 2
Date	Date